

Girls Incorporated of Worcester  
Phone: (508) 755-6455  
Fax: (508) 798-9847

125 Providence Street, Worcester MA 01604

GRLIW 172H FE050

CORI REQUEST FORM

Girls Inc is requesting all the available criminal offender record information (CORI) on the following individual from the Criminal History Systems Board pursuant to Chapter 6 172H which mandates organizations primarily engaged in providing activities or programs to children 18 years of age or less that accepts volunteers, to obtain all CORI regarding volunteers prior to accepting any person as a volunteer.

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VOLUNTEER INFORMATION (PLEASE SIGN)

\_\_\_\_\_  
LAST NAME

\_\_\_\_\_  
FIRST NAME

\_\_\_\_\_  
MIDDLE NAME

\_\_\_\_\_  
MAIDEN NAME OR ALIAS (IF APPLICABLE)

\_\_\_\_\_  
PLACE OF BIRTH

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
SOCIAL SECURITY #  
(Requested, not required)

\_\_\_\_\_  
ID THEFT INDEX PIN  
(If applicable)

\_\_\_\_\_  
MOTHER'S MAIDEN NAME

CURRENT AND FORMER ADDRESSES:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ ft \_\_\_\_\_ in WEIGHT: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_

STATE DRIVER'S LICENSE NUMBER: \_\_\_\_\_

\*\*\*\*THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE  
FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC  
IDENTIFICATION: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

All CORI request forms that include this field are required to be submitted to the CHSB via mail or fax to 617-660-4614.